

## Recycled Water Monitoring Form

Glenn County Mosquito and Vector Control District

Month: \_\_\_\_\_

Year: \_\_\_\_\_

<b>1.0 Recycled Water Monitoring:</b>				
<b>Day of Month</b>	<b>Flow to Ponds</b>	<b>Freeboard</b>	<b>General Conditions of dikes</b>	<b>Rainfall</b>
	(gpd) Daily	(feet) Weekly	(visual) Weekly	(inches/day) Daily
1				
2				
3				
4				
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31				

2.0 Compliance Inspections:	
Date of Monthly Inspection:	
Description of any violations:	
Date of compliance:	
Description of action/time schedule	

3.0 Operating Records:		
Any operational problems:	Yes	No
Plant/equipment breakdowns:	Yes	No
Corrective action taken:		

4.0 Employee Training		
Any monthly training conducted:	Yes	No
Dates of training:		
Personnel attended:		

<b>ANNUAL MONITORING ( Due February 1st each year)</b>			
Names/telephone numbers of contact people (operators)			
<u>Name</u>	<u>Position/Grade</u>	<u>Responsibility</u>	<u>Telephone No.</u>
Tablular summaries of monthly data:		Yes	No
Appropriate signatures:		Yes	No

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment."

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Position: \_\_\_\_\_